SECRE

SAPC .. SAPA

Copye 3 of 5

December 30, 1957

MEMORANDOM FOR 8

Chief, Finance Division

ATTENTION

Monotary Branch

SULTROP

25X1

Disturrement by Treasury Check

1. It is kindly requested that a W. S. Treasury Check be drawn in favor of the company listed herometer in the amount stated, which will be applicable to the contract or agreement shown. The postract marker and invoice identification must appear on the check.

8. Check trans in few of Boundary, Campunianum Am comm, 110.

b. mounts

e. Contract Maker: 33-210

do Devoice Burber: Da. Physikers Bo. 12 and Bo. 13

e. Check to be Deted: I James 1998

- 2. Pertinent documentation in compostion with this classified transaction which has not been included in comptrollers instruction No. 32 (Notice 20-56, after approval by the DCI 15 December 1956), is on file in the Office of the Project Comptroller.
- 3. The payment requested is based on progress made by the contractor to date and should be processed against Concrel Ledger Account Es. 138, titled "Dishursements of Appropriated Funds Chargeable to Confidential Funds Allotments The Allotment Symbol applicable to this request is the second to chargeable to Concrel Ledger Account to 50.1.
- 4. The check should be dated as stated in paragraph 1 and mailed in the attached scif-addressed envelope. If no envelope is attached, the undersigned should be contacted on extension then papers is ready for disposition.

Distribution:

Original & 1 - Addressee

3 - Contract TE-2191 (Finance)

4 - DIGEOPONY (Contracts)

- Chrono

HEBruce/aer:30 December 1957

Authorized Certifying (1771 or

30 December 1977

SECRE

25X1

Standard Form	anitized Copy No. 1034—Revisea escribed by	Approved for Rel	ease 2010/06	/08 : CIA-R	DP65 ES AN	-00523R	000100	18001	4-8	
Comptroller Septem (Gen. Reg. No. (Amended Fo	escribed by General, U. S. ber 7, 1950 . 51, Supp. No. 11) ebruary 20, 1952)	SERVI	CES OTHER T	HAN PERS	ONAL	Bu			 of 1	
							-	ge 1 c	ID BY	
U. S	:	(Department, bu	reau, or establishment)					PA	ום עו	
Voucher prep	pared at									
			(Give place and dat	.6)						
THE UNITED	STATES, Dr.,	Payee'	s Account No.							
<i>To</i> F	Edgerton, Ge	ermeshausen & C	rier, Inc.				-			
<u>_</u>		Ve v ada	(City)		tate)		_			
	(Add	AR	TICLES OR SERVICE	CES			UNIT I	PRICE	AMOUNT	
No. and Date of Order	Date of Delivery or Service	(Enter description, it schedule, and o	em number of contr ther information dec Invoice Numb	act or Federal su emed necessary)	apply	QUANTITY	Cost	Per	Dollars	Cts.
		Discount Terms	TUAOTGE MINIO	ers						
			Bu. Vo. #	12					\$16,516	07~
			-						\$16,516 \$ 1,651	C3 .
•			Bu. Vo.	13					\$ 1,651	9T .
D. 15/2 PO. 107										
PAYMENT:										
Complete Partial										
Final		T.T.								
			tinuation sheet(s) if n Veight	Government I	B/L No.	1 1		Total	\$18,167	68 "
Shipped from						ree must NO	T use this		<u> </u>	00
I certify that the	above bill is correct	and just and that payme	ent has not been rece	ived.	Differer	ices				
		(Sign original only)								
									STAT	
Date	*Payee	his certificate not required when a like	postificate is made by news on	attuched bill or bills)						
										<u> </u>
Per		Title							.,	
Contract No.		Date	Req. N	0.	1	Date /	11	voice Rec	a.	
Pursuant to author	ority vested in me,	certify that this account	is correct and proper	for p					A	
t Approved for \$									Dec 57	7
11-44-01-01-01-4			SIGN					Officer)	,	
Ву			ORIGINAL ONLY	4						
4			UNEI		.		- 0	er)		
Title (Appro	oving Offic	er)		Date						
	THE REVERSE OF T	IIS FORM MUST BE EXECUTED W	HEN PURCHASES ARE MA	DE OR SERVICES SEC	URED WITH	OUT WRITTEN A	GREEMENT II	N ANY FORM		
	ACCOU	NTING CLASSIFICATION	N (Appropriation Sy	mbol must be sh	own; oth	er classificat	ion option	al)	STAT-	
	Accoo	TIMO CERCON TONTO	(ippropriation)							
			Y							
(0)	N.	J J	10	for ¢	:		(on T-	eagiira- Af	the United State	ton :-
Paid by Check		dated							the United Star named above.	res in
Cash,	\$, on	, 19	Payee			(Sign original	only)		
*When a vouche	er is signed or receipte	d in the name of a company	or corporation, the na	me of the person						
writing the compa	any or corporate name,	as well as the capacity in whi Secretary", or "Treasurer",	as the case may he.	~ or oremine.						

"John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$______", and over his official title Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8

16-22900-5

Standard I Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180014-8 Form prescribed by Comptroller General, U. S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) (Amended February 20, 1952) LIC VOUCHER FOR PURCHASES AND ERVICES OTHER THAN PERSONAL Bu. Vou. No. PAID BY (Department, bureau, or establishment) Voucher prepared at _____ (Give place and date) THE UNITED STATES, Dr., Payee's Account No. _____ (City) ARTICLES OR SERVICES AMOUNT UNIT PRICE (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) No. and Date of Date of Delivery Order or Service QUANTITY Cost Per Dollars Cts. Discount Terms PAYMENT: Complete Partial Final Use continuation sheet(s) if necessary 118,167 68 Shipped from Weight Government B/L No. Total (Payee must NOT use this space) I certify that the above bill is correct and just and that payment has not been received. (Sign original only) Amount verified; correct for ____ Title Per _____ (Signature or initials)_ Contract No. Invoice Rec'd. Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$_____ (Authorized Certifying Officer) SIGN ORIGINAL ONLY THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) Check No. ______ on Treasurer of the United States in Paid by favor of payee named above. Cash, \$ Payee ___ *When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be. †If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$________", and over his officie! "**!!

*3-22900-5 Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8

VL		` -	ent, bureau, or establi	shment)			-	PA	ID BY
Voucher prep THE UNITED :		p	(Give place					3	22823 10F3
			_					COPT	/ OF _Z
<i>To</i> Ed	gerton, Ge	rmeshausen.	Grier, Ind (Payee)	7 *			-		
	bA)	iress)	(City)		(State)		_		
No. and Date of	Date of Delivery	(Enter descript	ARTICLES OR Sion, item number of and other informations.	SERVICES of contract or Fed	eral supply	QUANTITY	UNIT	PRICE	AMOUN
Order	or Service	Discount Terms	and other information	ton deemed nece			Cost	Per	Dollars
		Month end	ing 30 Hove	mber 1957					
									\$ 6,646
		Direct La	bor & Services						2,396
		Travel	C DOT ATCOR						174
PAYMENT:		Freight &							617
Complete			ect Charges						193 5,123
Partial		Burden Overhead							1,363
Final _			Jse continuation sheet		. 5.0			70.	\$16,516
Shipped from		to	Weight		ment B/L No.	yee must NO	Γ use this	Total space)	مدر ومدم
I certify that the	above bill is correc	t and just and that	payment has not be	en received.					
		(Sign original on	dy)						
n . 10/01/4	57 Jan 173	contho a	maghangan o	Cnion T					-
Date JC/ C4/	it it Mavee I'.()	gerton. Ger	a like by tificate is made by	payee on attached bill or	billa) Arno	unt verified:	correct for	,	16516.
P			concu	elle.		nature or initi			
Contract No.	THE SEA	Date Date	14/26/57	Req. No.		Date	I	nvoice Rec	'd.
Pursuant to author	ority vested in me,	I certify that this ac	count is correct and	proper for payme	ent.				CTAT
† Approved for \$				†			O		STAT
			SIGN ORIGIN						
Ву			ONLY		e				
			-	Dat	:e				
Title	•		HTED WHEN PHRCHASES	ARE MADE OR SERVIC	CES SECURED WITI	IOUT WRITTEN A	GREEMENT I	IN ANY FORM	
Title	THE REVERSE OF T	HIS FORM MUST BE EXEC	OLD WILL LONGINGED						
Title		HIS FORM MUST BE EXEC			ha abawa at	:6		1\	

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8 LL 1

Standard Form No. 1085—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)

Services Other Than Personal

Services Other Than Personal

22823 1 3.

CONTINUATION SHEET

U.S. Contracting Officer	Sheet No. 1 of Bureau Voucher No. 12
(Department hursen or establishment)	• • • • • • • • • • • • • • • • • • • •

No. and Date	Date of Delivery		TICLES OR SERV		QUAN- TITY	UNIT	PRICE	AMOUN	T
of Order	or Service	(Enter description, item n and other	umber of contract information deeme	or Federal supply schedule, ed necessary)	TITY	Cost	Per	Dollars	Ct
		Direct Labor Week ending """ Month Total Direct Materials & S Travel Freight & Exp Other Direct Burden Total Direct Overhead	Lacor Services Oress Charges Costs	2 216 (1/1)	- A - 7	Ly sit	, 3V	\$ 15,15	
		*Materials & S P.O.Mo. 21072 21075 Petty Cash """ 21033 21113 21086 21081		Vendor Lambda Electr Lee Office Eq " Pavell Electr Las Vegas Aut The Home Lumb City Janitor " Pavell Electr	uipmen ic Sup o Part er Co.	t ply		1	3.
		21129 21141 21117 21117 21112 21095 21090 21116 2116 21033	2791 2795 2836 2836 2844 2849 2770 2767 2767	EG&G Inv. Ite City Janitor Las Vegas Blu American Pamo " The Home Lumb McKinley Equi Pavell Electr Las Vegas Blu " Home Lumber C	Supply eprint or Inc er Co. pment ic Sup eprint "	Corp.		20	50.5
		Petty Cash """ 21160 21118 21065 21161	2822 2822 2809 2817 2813 2815	Supper Money Strip Drug St Ducommun Meta Pavell Electr Las Vegas Coi Lee Office Eq	ls & S ic n Mack	ine		2:	\$ 2 0 8

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8

Form prescribed by Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 61, Supp. No. 11)

Services Other Than Personal

CONTINUATION SHEET

U.S. Contracting Co	fficer	Sheet No	2	of Bureau	Voucher I	Vo12
(Department	t, bureau, or establishment)					

No. and Date of Order	Date of Delivery or Service	AR (Enter description item n	TICLES OR SERV	ICES or Federal supply schedule.	QUAN- TITY	UNIT	PRICE	AMOUN	<u>r</u>
of Order	or Service	and other	information deems	or Federal supply schedule, ed necessary)		Cost	Per	Dollars	Cts.
		*Naterials & Ser P.O. No. Cl 21135 21164 21146 21120 21175 21049 21117	2811 2821 2843 2846 2835 2835 2836	Vendor Electronic Supply Vegas Photo Servitzgerald Electronic Supply Vegas Photo Servitzgerald Electronic Alamo Airways " American Pancor	vice tric In te	1 c.		31 10 150 124 211	50

7 5		ctine Offi	r Release 20 ELIC VOUCHE ERVICES OT					Γ		D BY	
		(Departi	ment, bureau, or estai	blishment)					• • • •		
oucher prepa	red at		(Give pla					E-20093	64.00 7	2824	-
ie united st	TATES, Dr.,		Payee's Accou	nt No				Care entrangement	COPY	OF 3	
oEd	gerton, Ge	rmeshauser	& Grier,]	Inc.				1			·
			(rayee)				·				
(Address)			(City) ARTICLES OF	R SERVICES	(State)		1	UNIT	PRICE	AMOU	NT
lo. and Date of Order	Date of Delivery or Service	schedu	ption, item numbe le, and other inform	r of contract of nation deemed	r Federal supply necessary)	QUANT	ITY -	Cost	Per	Dollars	C
		Discount Term									
		Period en	nding 30 No	vember 1	957						
							1			\$ 1,65	1.
		Fixed Fe	3							` ` `	
YMENT:											
Complete 🔲											Ì
Partial 🔲											
Finalipped from		to	Use continuation sh Weight		overnment B/L!	No.	!_		Total		_ - _ -
			at payment has not			(Payee must					
colony silver silver		(Sign original			Dia						- 1
	T.	8									
ate 12/24/	57/ *Payee Ed	gerton, Ge	rmeshausen	& Grier,	Inc.						- 1
			sol.	Milia							
ontrac			26/57	Req. No.		Date			Invoice Rec	STAT	
ursuant to author	rity vested in me,	I certify that this	account is correct a	and proper for							
Approved for \$					†	(Au	thorize	d Certify	ying Officer)		
a.			ORIC	IGN Ginal	Title						
<i>y</i>			01	NLY	_						
"ala	THE REVENCE OF T		 XECUTED WHEN PURCHA	ISES ARE MADE OF	Date						
ite	THE REVERSE OF I		FICATION (Appropri								
							incati	on optic	mal)		

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180014-8 #1

Standard Form No. 1085-Revised

Form Prescribed by

Comptroller General, U. S.

September 7, 1950

(Gen. Reg. No. 51, Supp. No. 11)

Services Other Than Decompts of the company o

22824

CONTINUATION SHEET

No. and Date of	ARTICLES OR SERVICES		UNIT PRICE		AMOUNT		
of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	Ct
		Total Costs billed through 30 November 19 including Bu. Voucher No. 12	957			\$ 124,84	.8.
		Fixed Fee Earned (10% of above)				12,48	,4·
į		Fixed Fee previously billed				10,83	3.
		Amount of this Voucher				1,65	1.
-							
		"I certify that the Fixed Fee claimed is c that it is proportionate to the progress	orrect made or	and ju	st; an	ad t."	
		EDGERTON, GERMESHAUSEN & GRIER, IN	d.				
		roller				STAT	
						:	